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Krista K. Merrimac (Signature (Date) December

APPLICATION NO.	· FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/264,547	03/08/1999	TIMOTHY N. JONES	09943/006001	3355

TITLE OF INVENTION: SUBDIVIDING A DIGITAL DENTITION MODEL

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APPLN. TYPE	SMALL ENTITY	ISSUE F	FEE PUBLICATION FEE	TOTAL FEE(S) D	UE	DATE DUE		
nonprovisional	-YES NO	-\$700	► \$1400	\$0	<b>-\$</b> 70 <b>0</b> -\$	1400	12/13/2005	
EXAMINER		ART UN	IIT	CLASS-SUBC LASS				
WILSON, JOHN J		3732		433-024000	•		-	
CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless	n 37 CFR 3.11. Completion EE	Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignee of this form is NO	(1) the na or agents (2) the na registered 2 registered listed, no THE PATEN data will app T a substitute (3) RESIDENCE	ear on the patent. If an assign	t attorneys 1 Ll member a 2 es of up to no name is 3	LP	Townsend and	
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Authorized Signature	S.B. Kob	val		Date	December 1	2, 2005		
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